DOG LICENSE APPLICATION

TOWN OF LINDLEY

OWNER INFORMATION Owner's Name: _____ Cell Phone: _____ Home Phone:____ Mailing Address: Physical Address: (if different from mailing) DOG INFORMATION Dog's Name: ______Breed: _____ Date of Birth: _____ Color/Markings: _____ Please check the box that applies: Male Neutered Female Spayed Male Un-altered Female Un-altered \$11 Spayed/Neutered \$18 Un-altered **VETERINARY INFORMATON** Vet Name: _____Phone: ____ PAPERWORK TO INCLUDE WITH THIS APPLICATION: Spay/Neuter Certification must be included and current. Please include a check or money order for the proper fee above. Make payable to Lindley Town Clerk. Mail or drop forms off at the Lindley Town Hall. 637 County Route 115, PO Box 62, Lindley, NY 14858. Please DO NOT send original copies of spay/neuterpaperwork and/or rabies vaccine certificates. If this is a new registration, a dog tag will be mailed to you along with your license to the address listed

on this application. If this is a renewal, a paper license will be mailed to you.